MARYLAND STATE DEPARTMENT OF EDUCATION

OFFICE OF CHILD CARE

200 West Baltimore Street • Baltimore, Maryland 21201

MARYLAND CHILD CARE CREDENTIAL APPLICATION

INSTRUCTIONS: Complete this application form and mail it with <u>all</u> documentation to the Office of Child Care (OCC) at the above address. Answer <u>all</u> questions completely in the space provided. For first application answer one of the questions on page two of the application. All applications must be accompanied by required documentation. Incomplete applications will be returned.

Applicant's Nam								
(Please print or type) Last			First	Middle		Maiden		
Social Security #	(required):							
Mailing Address								
	Number	Street	Apt. # (if appli	•		State Zip Code		
				ning Phone #:()			
E-mail:								
I am a: (Check the	appropriate b	ox.)						
☐ Family Child Care Provider, registration #:								
☐ Child Care Center Employee: (check primary position)								
□Director (age group(s)) □Senior Staff (Infant/Toddler)□Senior Staff (Preschool)								
☐Group Leader ☐ Assistant Group Leader ☐Aide (Infant/Toddler) ☐Aide (Preschool) ☐Aide (School-Age)								
☐Other:(age group(s))								
Center Name License #:								
Center Address								
	Number	Street		City	State	Zip Code		
APPLICATION		DDI IOATION						
TYPE:	⊔FIRSTA	RST APPLICATION DATE/UPGRADE						
(check only one)	UPDATE							
	RENEW	AL (Submit information	on pertaining to the pr	evious 12 month p	eriod only.)			
REQUIREMENT		SUBMIT COPIES C	F:					
1. TRAINING		 OCC Approved Training Certificates (within 5 years of application date) College grade slips/transcripts (regardless of date) 						
		 College grade slips/transcripts (regardless of date) College degree with accompanying transcript from an accredited college or university. 						
(Foreign degrees must be translated and evaluated.)								
2. PROFESSIONAL		Professional orgCanceled check	ganization membershi	p card(s)				
ACTIVITIES (Must be within the previous								
12-month period.)		Other documentation, as appropriate.						
3. EXPERIENCE				any family day ca	re certificate	of registration, including		
		 current certificate, if applicable. <u>Center Staff</u> - letter of employment on center letterhead or other documentation 						
		Any other documentation of experience, letters, time sheets, staff evaluation card, etc.						
I affirm that all information on this application and all attached documentation is true and correct. I understand that if I								
						ate in the credential		
						<u>all</u> required information		

including, documentation of training, professional activity, and experience. My signature below makes this statement

Date:

Signature of Applicant:

binding.

Keep a copy of the completed application (Page One and Two) and all documentation for your files. OCC 280 (Revised 7/05) - All previous editions are obsolete.	

MARYLAND CHILD CARE CREDENTIAL APPLICATION - PAGE TWO

- In 300 to 500 words answer one of the questions below.
- Your answer is to be handwritten and legible.
- Check the box next to the question you are answering.
- Attach additional pages, if necessary.

☐ Why did you become a child care provider?							
☐ Why do you want to get the Maryland Child Care Credential?							